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PATENT APPLICATION FEE DETERMINATION Application or Filing Date: Docket Number RECORD To be Mailed Substitute for Form PTO-875 APPLICATION AS FILED - PART I OTHER THAN SMALL ENTITY (Column 1) (Column 2) SMALL ENTITY OR FOR NUMBER FILED NUMBER EXTRA RATE (\$) RATE (\$) FEE (\$) FEE (\$) BASIC FEE NA NA N/A N/A (37 CFR 1.16(a), (b), or (c)) SEARCH FEE NA NA NA N/A (87, CFR 1.16(k), (i), or (m)) **EXAMINATION FEE** NA NA N/A N/A (37 CFR 1.16(o), (p), or (q)). TOTAL CLAIMS mhus 20 = X. 325 = OR X \$50 = (87 CFR 1.16(i)) INDEPENDENT CLAIMS minus 3 = X \$100= X \$200 = 137 CFR 1.16(h)) If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) DAPPLICATION SIZE FEE for each additional 50 sheets or fraction (37 CFR 1.16(s)) thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(1)) + \$180 +\$360 * If the difference in column 1 is less than zero, enter *0* in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY CLAIMS HIGHEST REMAINING NUMBER PRESENT ADDITIONAL ADDITIONAL RATE (S) RATE (\$) AFTER **PREVIOUSLY** ENDMENT EXTRA **FEE (\$)** FEE (\$) **AMENDMENT PAID FOR** Total of CFR Minus X \$25 = OR X \$50= 1.16(7) Independent = 1. Minus X \$100 = OR X \$200= (37 CFR 1.16(h)) Application Size Fee (37 CFR 1,16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1)) OR TOTAL TOTAL ADD'L OR ADD'L FEE FEE (Column 1) (Column 2) (Cotumn 3) CLAIMS HIGHEST REMAINING. NUMBER PRESENT ADDITIONAL **ADDITIONAL** RATE (\$) RATE (\$) AMENDMENT AFTER PREVIOUSLY. EXTRA FEE (\$) F哇 (\$) AMENDMENT PAID FOR Total profit Minus X \$25 = OR X \$50 = 1.16(0) Independent Minus. X \$100 = OR (37 CFR 1.18(M) X \$200 = Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) OR TOTAL . TOTAL **CALCULATE** ADD'L ADD'L OR 1 FEE FEE * If the entry in column 1 is less than the entry in column 2, write '0' in column 3, ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20; enter "20". If the Highest Number Previously Paid For IN THIS SPACE IS less than 9, enter 3. The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

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